PART B - FEE(S) TRANSMITTAL

Complete and send the	his form, together wit	h applicable fe	ee(s), to: <u>Mail</u> or <u>Fax</u>	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885		
INSTRUCTIONS: As for appropriate, All deriver cor indicators and corrected to	rm should be used for tran respondence including the l below or directed otherwise	smitting the ISSU Patent, advance ord in Block 1, by (a)	E FEE and PUBLIC ders and notification specifying a new of		uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 22442 7590 10/17/2005 -				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
SHERIDAN ROSS PC 1560 BROADWAY SUITE 1200 DENVER CO 80202 /20/2006 WASTAWE 0000079 10806886				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
/20/2006.MASEAMS_ 000	00079 10806886			Corina K.	Aschenbrenner/	(Depositor's name)
FC:2501 700-00 OP FC:1504 300-00 OP				Comer	K Unhulner	(Signature)
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10/806,886			FIRST NAMED INVER		4239-3-1-1	CONFIRMATION NO.
TITLE OF INVENTION: M	IETHOD AND SYSTEM FO	OR REDUCING B	ODY WEIGHT IN A	N ENCLOSED ATMO	OSTPHERIC ENVIRONMEN	T
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE ; P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	01/17/2006
EXAMINER		ART UNIT		LASS-SUBCLASS	-	
LAWRENCE JR, FRANK M		1724		095-008000	_	,
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN		ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NO	or agents OR, alti (2) the name of a registered attorne 2 registered pater listed, no name w THE PATENT (print data will appear on T a substitute for filit	single firm (having as y or agent) and the na it attorneys or agents. I ill be printed. or type) the patent. If an assign ag an assignment. TY and STATE OR CO	ent attorneys a member a mes of up to if no name is gnee is identified below, the o	dan Ross PC
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4a. The following fee(s) are Signature Issue Fee	small entity discount permitt	41	Payment of Fee(s): A check in the a	mount of the fee(s) is of lit card. Form PTO-20, hereby authorized by	38 is attached. charge the required fee(s), or	
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Authorized Signature	Quis ols	Sta,		Date	m 17, 2006	5
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submitting the completed a this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22313	application form to the USP is for reducing this burden, signia 22313-1450. DO NOT 1-1450.	should be sent to the SEND FEES OR	e Chief Information	in or retain a benefit by is estimated to take 1 is individual case. Any Officer, U.S. Patent ar MS TO THIS ADDRE	y the public which is to file (and 2 minutes to complete, included comments on the amount of the trademark Office, U.S. Described to the commissioner of the commissio	partment of Commerce, P.O. r for Patents, P.O. Box 1450